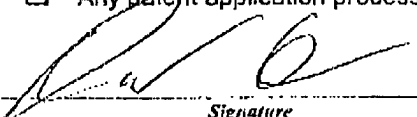


3742

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. <b>EXC-0001</b>	
Applicant(s): <b>SOL AISENBERG ET AL.</b>					
Serial No. <b>09/679,096</b>	Filing Date <b>October 4, 2000</b>	Examiner <b>Jeffery</b>		Group Art Unit <b>3742</b>	
Invention: <b>METHOD AND APPARATUS FOR HAND DRYING</b>				<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>AUG 11 2004</b>	
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. <input type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	28 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	10 -	8 =	2 x	\$43.00	\$86.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$86.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <b>06-1130</b> in the amount of <b>\$86.00</b> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>06-1130</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature		Dated: <b>August 11, 2004</b>			
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 23413		I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  _____ Signature of Person Mailing Correspondence  _____ Typed or Printed Name of Person Mailing Correspondence			
CC:					